U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:



584/	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Richard M Duffy	Name International Association of Fire Fighters		
	Labor Organization File Number 000-317		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1750 New York Avenue, NW	Street 1750 New York Avenue, NW		
City Washington	City Washington		
State District of Columbia ZIP Code + 4 20006-5395	State District of Columbia ZIP Code + 4 20006-5395		
5. Position in labor organization. Assistant to the General Pres	sident		
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu-	use or minor child directly or indirectly had any of the following interests isions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or	,		
monetary value from an employer whose employees your organizati	on represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name N/A			
Trade Name, if any:			
	·		
P.O. Box, Bldg., Room No., if any	7.b. Amount.		
Street	r.s. Amount.		
City			
State ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned sknowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Signed	On 07/12/2005 202-737-8484		
	Date Telephone Number		
Form LM-30 (2003)	D 4 45		

Name of Person Filing Richard Duffy	File Number U -		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Woodley & McGillivary			
Trade Name, if any:	a. Labor Organization b. Trust		
P.O. Box, Bldg., Room No., if any Suite 400	c. Employer		
Street 1125 15th Street	c. Employer		
City Washington			
State District of Columbia ZIP Code + 4 20005			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	General Counsel		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City	11.b. Approximate dollar value of such dealing.	\$1,073,225	
	12.a. Nature of interest held or income received. Dinner; 10/6/04		
State ZIP Code + 4	21111027 2070701		
	12.b. Amount.	\$121	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		·	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		
Independent Description U		L	

Name of Person Filing	Richard Duffy	File Number U -	
		1	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Woodley & McGillivary	The Labor Council of	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Suite 400	b. Trust	
Street 1125 15th Street	c. Employer	
City Washington		
State District of Columbia ZIP Code + 4 20007		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	General Counsel	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$1,073,225
	12.a. Nature of interest held or income received.	
	Christmas Gift	
·		•
	12.b. Amount.	\$50
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Name of Person Filing Richard Duffy	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Kelly Press	N a Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1701 Cabin Branch Road	c. Employer	
City Cheverly		
State Maryland ZIP Code + 4 20785		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Vendor	
Toda Nama if an I		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	#2,440,000
	12.a. Nature of interest held or income received.	
	Christmas Gift	
		al de la constante de la const
	•	maxima and a
	12.b. Amount.	\$50

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (include	ding trade name, if any).	9. Business deals with:	
Name Financial Innovations	Incorporated	a. Labor Organization	
Trade Name, if any: FII		a. Labor Organization	
P.O. Box, Bldg., Room No., if any		b. Trust	
		c. Employer	
Street One Weingeroff Blvd.			
City Cranston			
State Rhode Island	ZIP Code + 4 02910		
10. If 9.b. or 9.c. is checked give trust or em	ployer's name.	11.a. Nature of such dealing.	
Name		Vendor	
Trade Name, if any:			Document
P.O. Box, Bldg., Room No., if any			And the second s
Street			
- Ottober			
City			
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$1,013,000
		12.a. Nature of interest held or income received.	
		Christmas Gift	
		·	,
		12.b. Amount.	\$60